

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>SW</i> | <i>32</i> | <i>11/7</i> |
| FORMALITY REVIEW | <i>SW</i> | <i>1143</i> | <i>11-20-01</i> |
| RESPONSE FORMALITY REVIEW | <i>SM</i> | <i>928</i> | <i>04/01/02</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|----------|
| Final Original | |
| 1 | 12-02-03 |
| 2 | 12-13-01 |
| 3 | 02-03-04 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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324